Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	⊠ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself				
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Nicholas First name F Middle name Marich Last name and Suffix (Sr., Jr., II, III)	_	Jeanne First name M. Middle name Marich Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filling this petition.			FKA Jeanne Pearson FKA Jeanne Heintzinger	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8386		xxx-xx-9469	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Your Employer Identification Number (EIN), if any.		EIN	EIN
5.	Where you live	1462 McTweed Lane	If Debtor 2 lives at a different address:
		New Franklin, OH 44203 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Summit	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 Nicholas F Marich otor 2 Jeanne M. Marich			Case number (if known)	
Par	t 2: Tell the Court About Y	our Bankruptcy Ca	se		
7.	The chapter of the Bankruptcy Code you are		rief description of each, see <i>Notice Reg</i>	quired by 11 U.S.C. § 342(b) for Individuals I	Filing for Bankruptcy
	choosing to file under	☐ Chapter 7	3 1 1 3		
		☐ Chapter 11			
		☐ Chapter 12			
		☐ Chapter 13			
8.	How you will pay the fee	about how yo	u may pay. Typically, if you are paying tatorney is submitting your payment on	ase check with the clerk's office in your loca the fee yourself, you may pay with cash, cas your behalf, your attorney may pay with a c	hier's check, or money
			the fee in installments. If you choose in Installments (Official Form 103A).	this option, sign and attach the Application	for Individuals to Pay
		but is not requal applies to you	uired to, waive your fee, and may do so Ir family size and you are unable to pay	this option only if you are filing for Chapter 7 only if your income is less than 150% of the the fee in installments). If you choose this o ved (Official Form 103B) and file it with your	official poverty line that ption, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	⊠ No. □ Yes.			
		District	When	Case number	
		District	When	Case number	
		District	When	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	⊠ No □ Yes.			
		Debtor		Relationship to you	
		District	When	Case number, if know	/n
		Debtor		Relationship to you	
		District	When	Case number, if know	/n

11. Do you rent your residence?

☐ No.

☑ Yes.

Go to line 12.

No. Go to line 12.

bankruptcy petition.

 \boxtimes

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

	otor 1 Nicholas F Marich			Coop number (# Lawye)
Der	otor 2 Jeanne M. Marich	l		Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	⊠ No.	Go to Part 4.	
	business.	☐ Yes.	Name and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State	e & ZIP Code
	it to this petition.		Check the appropriate box	to describe your business:
			_	ess (as defined in 11 U.S.C. § 101(27A))
				Estate (as defined in 11 U.S.C. § 101(51B))
				fined in 11 U.S.C. § 101(53A)) (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	· · · · · · · · · · · · · · · · · · ·
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed you are o	under Subchapter V so that it hoosing to proceed under Sulvistatement, and federal incom	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 1 Code.	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.
		☐ Yes.		1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	⊠ No. □ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Nicholas F Marich
Debtor 2 Jeanne M. Marich

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Nicholas F Marich tor 2 Jeanne M. Marich				Case number (if	known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			l in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			☑ Yes. Go to line 17.					
		16b.	Are your debts primarily busi money for a business or investr					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	that are not consu	mer debts or business d	lebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	⊠ Yes.	I am filing under Chapter 7. Do are paid that funds will be availa			y is excluded and administrative expense:		
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		⊠ No □ Yes					
18.	How many Creditors do you estimate that you owe?	☐ 1-49 ☒ 50-99 ☐ 100-1	199	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	\$50,000,001	1 - \$50 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion		
20.	How much do you estimate your liabilities to be?	⊠ \$100,	50,000 ,001 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	l - \$50 million	\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion		
Par	7: Sign Below							
For	you	I have ex	xamined this petition, and I declar	e under penalty of p	perjury that the informat	ion provided is true and correct.		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I reques	t relief in accordance with the cha	pter of title 11, Unit	ed States Code, specific	ed in this petition.		
			tcy case can result in fines up to S			roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519		
			nolas F Marich		/s/ Jeanne M. Marie	ch		
			as F Marich e of Debtor 1		Jeanne M. Marich Signature of Debtor 2			

Executed on January 22, 2024 MM / DD / YYYY

January 22, 2024 MM / DD / YYYY

Executed on

Debtor 1	Nicholas F Marich		
Debtor 2	Jeanne M. Marich	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael A Steel	Date	January 22, 2024
Signature of Attorney for Debtor		MM / DD / YYYY
Michael A Steel 0072367		
Printed name		
Michael Steel		
Firm name		
2950 West Market Street Suite G		
Fairlawn, OH 44333		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	msteel@steelcolaw.com
0072367 OH		
Bar number & State		

Fill	in this informa	ation to identify your case:		
Del	otor 1	Nicholas F Marich First Name Middle Name Last Name		
Del	otor 2	Jeanne M. Marich		
	use if, filing)	First Name Middle Name Last Name		
Uni	ted States Banl	cruptcy Court for the: NORTHERN DISTRICT OF OHIO		
	se number		☐ Cł	neck if this is an
			an	nended filing
<u>Of</u>	<u>ficial For</u>	<u>m 106Sum</u>		
<u>Su</u>	mmary of	Your Assets and Liabilities and Certain Statistical Information		12/15
info	rmation. Fill o	id accurate as possible. If two married people are filing together, both are equally responsible fo ut all of your schedules first; then complete the information on this form. If you are filing amend		
you	r original form	s, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summa	rize Your Assets		
				ur assets
			Valu	ue of what you own
1.	Schedule A/I 1a. Copy line	3: Property (Official Form 106A/B) 55, Total real estate, from Schedule A/B	\$	0.00
		62, Total personal property, from Schedule A/B	\$	561,686.43
		63, Total of all property on Schedule A/B	\$ -	561,686.43
D			Ψ_	001,000.40
Par	t 2: Summa	rize Your Liabilities		
				ur liabilities ount you owe
2.	Schedule D: 1	Creditors Who Have Claims Secured by Property (Official Form 106D)		,
۷.		total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	104,066.00
3.		: Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	¢	11,256.89
	.,	,		
	ob. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$ <u>_</u>	173,692.16
		Your total liabilities	\$	289,015.05
Par	t 3: Summa	rize Your Income and Expenses		
4.		our Income (Official Form 106I)		
	Copy your co	mbined monthly income from line 12 of Schedule I	\$_	5,936.25
5.	Schedule J: Y Copy your mo	Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	\$_	6,158.78
Par	t 4: Answer	These Questions for Administrative and Statistical Records		
6.	Are you filing	g for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You	have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur othe	r schedules.
7.	⊠ Yes	debt do you have?		
•		·		
		bts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a ." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	person	al, family, or household
		bts are not primarily consumer debts. You have nothing to report on this part of the form. Check this b	ox and	submit this form to the
Offi		h your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

Debtor 1	Nicholas F Marich
Debtor 2	Jeanne M. Marich

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,217.63

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 7,956.89
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$ 43,825.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$55,081.89_

Fill in	this infor	mation to identify your case	and this filing:		
Debto	or 1	Nicholas F Marich			
		First Name	Middle Name Last Name		
Debto	or 2 e, if filing)	Jeanne M. Marich First Name	Middle Name Last Name		
(Spouse	s, ii iiiiig)	i iist ivailie	Midule Name Last Name		
United	d States Ba	ankruptcy Court for the: NOR	THERN DISTRICT OF OHIO		
Case	number				☐ Check if this is an
					amended filing
Offic	cial Fo	orm 106A/B			
<u> 301</u>	iedui	e A/B: Propert	У		12/15
informa	ation. If mor r every que:	e space is needed, attach a sepa stion.	possible. If two married people are filing together, both a rate sheet to this form. On the top of any additional page, or Other Real Estate You Own or Have an Interest In		
1. Do	you own or	have any legal or equitable inter	est in any residence, building, land, or similar property?		
_	o. Go to Par				
ЦΥ	es. Where	is the property?			
Part 2:	Describe	Your Vehicles			
_	_				
			interest in any vehicles, whether they are registed or report it on Schedule G: Executory Contracts and U		hicles you own that
3011160	ile else ull	ves. Il you lease a verilole, also	report it on schedule G. Executory Contracts and C	nexpired Leases.	
3. Ca	ırs, vans, t	trucks, tractors, sport utility v	vehicles, motorcycles		
ПΝ	No				
⊠ Y					
3.1	Make:	Harley-Davidson	Who has an interest in the property? Check one	Do not deduct secured cla	
	_	FLHT	☑ Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	_	2019	☐ Debtor 2 only	Current value of the	Current value of the
	Approxima	te mileage: 6,855	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other infor	mation:	\square At least one of the debtors and another		
				\$26,725.00	\$26,725.00
			Check if this is community property (see instructions)	\$20,725.00	φ20,725.00
3.2	Make:	Chevrolet	Who has an interest in the property? Check one	Do not deduct secured cla	
J.Z	-	Silverado	_	the amount of any secured Creditors Who Have Claim	
	_	2021	☑ Debtor 1 only ☐ Debtor 2 only		, , ,
	Approximat		☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other infor	<u> </u>	☐ At least one of the debtors and another	entine property:	portion you own:
	,				
			☐ Check if this is community property (see instructions)	\$40,954.00	\$40,954.00

Official Form 106A/B Schedule A/B: Property page 1

Debto Debto		eanne M. M			Case number (if known)	
3.3	Make: Model:	Chevrolet Tahoe	t	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any	sured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
Г		2021 nate mileage:	35273	□ Debtor 2 only☑ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of entire property?	the Current value of the portion you own?
				Check if this is community property (see instructions)	\$49,147	7.00 \$49,147.00
	<i>mples:</i> B lo			nd other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcyc		
				rn for all of your entries from Part 2, including that number here		\$116,826.00
Part 3: Do yo			nal and Household I egal or equitable in	tems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	a <i>mples:</i> No	d goods and Major applian escribe	ces, furniture, linens	, china, kitchenware		·
			Furniture Appliances			\$400.00 \$600.00
Exa	, No	Televisions ar		eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music c	collections; electronic devices
Exa	amples: No		figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin	, or baseball card collections;
Exa	amples: No	t for sports a Sports, photo musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
E:	No [']	: Pistols, rifles	s, shotguns, ammuni	tion, and related equipment		
<i>E</i> :	No [']	: Everyday clo	othes, furs, leather co	oats, designer wear, shoes, accessories		
	169. D		Clothing			\$200.00

Debtor 1 Debtor 2	Nicholas F M Jeanne M. M				Case number (if known)
⊠ No		velry, co	stume jewelry, eng	gagement rings, wedding r	rings, heirloom jewelry, watches	, gems, gold, silver
	farm animals ples: Dogs, cats, b	oirds, hoi	rses			
	Describe	Dog				\$0.00
		Cat				\$0.00
⊠ No	other personal an			did not already list, inclu	ding any health aids you did i	not list
for Pa	art 3. Write that r	number	here	Part 3, including any er	ntries for pages you have attac	\$1,450.00
	escribe Your Financ wn or have any le			in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No [′]	ples: Money you h	•		home, in a safe deposit bo	ox, and on hand when you file y Cash	
Exam _l □ No				ecounts; certificates of dep nts with the same institutio Institution name:	on, list each.	okerage houses, and other similar
		17.1.	Checking	Huntington		\$47.62
		17.2.	Savings	Huntington		\$1.93
		17.3.	Checking	Huntington		\$2.63
		17.4.	Checking	Huntington		\$2,261.26
		17.5.		KeyBank		\$0.25
		17.6.	Checking	KeyBank		\$0.00
		17.7.		KeyBank		\$7.69

Debtor Debtor		Case number (if kno	own)
<i>Exa</i> ⊠ N	ands, mutual funds, or publicly traded stocks amples: Bond funds, investment accounts with b o Institution or issue	rokerage firms, money market accounts	
and ⊠ N	d joint venture o	rporated and unincorporated businesses, including an in	terest in an LLC, partnership,
<u> </u>	es. Give specific information about them Name of entity:	% of ownership:	
Ne No ⊠ N	n-negotiable instruments are those you cannot tro	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
ЦΥ	es. Give specific information about them Issuer name:		
n			
<i>Exa</i> □ N	0	403(b), thrift savings accounts, or other pension or profit-sha	ring plans
⊠ Y	es. List each account separately. Type of account:	Institution name: OPRS	\$400,000.00
	IRA	Capital Group American Funds	\$40,039.05
Yo Exa ⊠ N	amples: Agreements with landlords, prepaid rent	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications cor Institution name or individual:	mpanies, or others
\boxtimes N	` ' '	oney to you, either for life or for a number of years)	
	J.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition	n program.
□Y	es Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 52	21(c):
\bowtie N	usts, equitable or future interests in property o es. Give specific information about them	(other than anything listed in line 1), and rights or power	s exercisable for your benefit
26. Pa <i>Exa</i> <u>⊠</u> N	tents, copyrights, trademarks, trade secrets, amples: Internet domain names, websites, proce		
<i>Exa</i> ⊠ N	0	bles operative association holdings, liquor licenses, professional lic	censes
	es. Give specific information about them		O
woney	or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

	btor 1 btor 2	Nicholas F Marich Jeanne M. Marich		Case number (if known)	
	☐ No	efunds owed to you Give specific information about	them, including whether you alrea	dy filed the returns and the tax years	
			2023 tax refund (unfiled)		Unknown
j	<i>Examp</i> ⊠ No	y support oles: Past due or lump sum alim Give specific information	ony, spousal support, child suppor	t, maintenance, divorce settlement, propert	y settlement
	<i>Examp</i> ⊠ No	r amounts someone owes you ples: Unpaid wages, disability in benefits; unpaid loans you Give specific information		fits, sick pay, vacation pay, workers' comp	ensation, Social Security
	Examp	ests in insurance policies ples: Health, disability, or life ins	urance; health savings account (H	SA); credit, homeowner's, or renter's insura	nce
	⊠ No □ Yes.	Name the insurance company of Company		Beneficiary:	Surrender or refund value:
	If you a somed ⊠ No		you from someone who has die st, expect proceeds from a life ins	d urance policy, or are currently entitled to red	ceive property because
ļ	<i>Examp</i> ⊠ No		er or not you have filed a lawsui putes, insurance claims, or rights	t or made a demand for payment to sue	
	⊠ No	contingent and unliquidated Describe each claim	claims of every nature, including	g counterclaims of the debtor and rights	to set off claims
	Any fi ⊠ No □ Yes.	inancial assets you did not all Give specific information	eady list		
36.				y entries for pages you have attached	\$442,410.43
Par	rt 5: De	scribe Any Business-Related Pro	perty You Own or Have an Interest In	. List any real estate in Part 1.	
	No. Go	own or have any legal or equitable to Part 6. Go to line 38.	e interest in any business-related pr	operty?	
Par		escribe Any Farm- and Commercia you own or have an interest in farmla	Fishing-Related Property You Own nd, list it in Part 1.	or Have an Interest In.	
46.	⊠ No.	ou own or have any legal or eq Go to Part 7. . Go to line 47.	uitable interest in any farm- or o	commercial fishing-related property?	
Par	rt 7:	Describe All Property You Own	or Have an Interest in That You Did	Not List Above	

Official Form 106A/B Schedule A/B: Property page 5

Deb Deb	tor 1 Nicholas F Marich tor 2 Jeanne M. Marich		Case number (if known)	
	Do you have other property of any kind you did not already li Examples: Season tickets, country club membership No Yes. Give specific information	st?		
	UTMA Account as fiduciary for	children.		\$1,000.00
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$1,000.00
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$116,826.00		
57.	Part 3: Total personal and household items, line 15	\$1,450.00		
58.	Part 4: Total financial assets, line 36	\$442,410.43		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$1,000.00		
62.	Total personal property. Add lines 56 through 61	\$561,686.43	Copy personal property total	\$561,686.43
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$561,686.43

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify you	r case:		
Debtor 1	Nicholas F Mari	ch		
	First Name	Middle Name	Last Name	
Debtor 2	Jeanne M. Mario	:h		
(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as	Exempt				
1.	Which set of exemptions are you claiming	g? Check one only, eve	n if yo	ur spouse is filing with you.		
		ankruptcy exemptions.	11 U.S.C. § 522(b)(3)			
	☐ You are claiming federal exemptions.	11 U.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/A	B that you claim as exc	empt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	2021 Chevrolet Silverado 34,573	\$40,954.00	\boxtimes	\$4,450.00	Ohio Rev. Code Ann. §	
	miles Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	2329.66(A)(2)	
	2021 Chevrolet Silverado 34,573	\$40,954.00	\boxtimes	\$1,450.00	Ohio Rev. Code Ann. §	
	miles Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	2329.66(A)(18)	
	2021 Chevrolet Silverado 34,573	\$40,954.00	\boxtimes	\$228.62	Ohio Rev. Code Ann. §	
	miles Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	2329.66(A)(18)	
	2021 Chevrolet Tahoe 35273 miles	\$49,147.00	\boxtimes	\$4,450.00	Ohio Rev. Code Ann. §	
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	2329.66(A)(2)	
	Furniture	\$400.00	\boxtimes	\$400.00	Ohio Rev. Code Ann. §	
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)	

Debtor 1 Nicholas F Marich
Debtor 2 Jeanne M. Marich

Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Appliances** Ohio Rev. Code Ann. § \$600.00 \$600.00 Line from Schedule A/B: 6.2 2329.66(A)(4)(a) 100% of fair market value, up to any applicable statutory limit Ohio Rev. Code Ann. § **Electronics** \$250.00 \$250.00 \boxtimes 2329.66(A)(4)(a) Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Clothing Ohio Rev. Code Ann. § \$200.00 \$200.00 \boxtimes 2329.66(A)(4)(a) Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Cash Ohio Rev. Code Ann. § \$50.00 \boxtimes Line from Schedule A/B: 16.1 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Checking: Huntington *3664 Ohio Rev. Code Ann. § \$47.62 \$47.62 \boxtimes 2329.66(A)(3) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Huntington *9033 Ohio Rev. Code Ann. § \$1.93 \$1.93 \boxtimes Line from Schedule A/B: 17.2 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Checking: Huntington *3965 Ohio Rev. Code Ann. § \$2.63 \boxtimes Line from Schedule A/B: 17.3 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Checking: Huntington *9172 Ohio Rev. Code Ann. § \$2,261.26 \boxtimes Line from Schedule A/B: 17.4 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Ohio Rev. Code Ann. § Checking: Huntington *9172 \$2,261.26 \$1,271.38 \boxtimes Line from Schedule A/B: 17.4 2329.66(A)(18) 100% of fair market value, up to any applicable statutory limit KeyBank *2246 Ohio Rev. Code Ann. § \$0.25 \$0.25 \boxtimes Line from Schedule A/B: 17.5 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit KeyBank *7840 Ohio Rev. Code Ann. § \$7.69 \boxtimes \$7.69 Line from Schedule A/B: 17.7 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit OPRS from previous employer. Ohio Rev. Code Ann. § \$400,000.00 \$400,000.00 \boxtimes Line from Schedule A/B: 21.1 2329.66(A)(10)(c) 100% of fair market value, up to any applicable statutory limit

	btor 1 btor 2	•	holas F Marich Inne M. Marich				Case number (if known)	
			iption of the property N/B that lists this prop		Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
					Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
	Capital Group American Funds Line from Schedule A/B: 21.2		\$40,039.05		\$40,039.05 100% of fair market value, up to any applicable statutory limit	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)		
3.		bject to No	adjustment on 4/01	/25 and every 3	,	ses fil	ed on or after the date of adjustmer 215 days before you filed this case	,

					_	
Fill in this informati	on to identify you	r case:				
	Nicholas F Mario	ch				
	First Name	Middle Name	Last Name			
	Jeanne M. Maric First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the:	NORTHERN DISTRICT OF (OHIO			
Case number (if known)					☐ Check	if this is an
					ameno	led filing
Official Form 1	06D					
		Who Have Claims	Secure	hy Property	17	12/15
ochedule D.	Oleaitois	Willo Have Claims	occure.	a by Flopeit	<u> </u>	12/13
		f two married people are filing toge , number the entries, and attach it				
1. Do any creditors hav	e claims secured by	your property?				
☐ No. Check this	s box and submit th	nis form to the court with your oth	ner schedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in all	of the information b	pelow.				
Part 1: List All Se	ecured Claims			0.11	0:1 5	0.10
		nore than one secured claim, list the		Column A	Column B	Column C
		s a particular claim, list the other cred al order according to the creditor's na		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ally Financia	<u>ıl</u>	Describe the property that secure		\$31,471.00	\$40,954.00	\$0.00
Creditor's Name		2021 Chevrolet Silverado miles	34,573			
PO BOX 3809	901	As of the date you file, the claim i	is: Check all that			
Bloomington		apply. ☐ Contingent				
Number, Street, City		☐ Unliquidated				
Who owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply	у.			
Debtor 1 only		☐ An agreement you made (such a	s mortgage or sec	ured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor	r 2 only	car loan) ☐ Statutory lien (such as tax lien, n	nechanic's lien)			
At least one of the de	ebtors and another	☐ Judgment lien from a lawsuit				
Check if this claim community debt	relates to a	☑ Other (including a right to offset)	Auto Loan			
•						
Date debt was incurred	d <u>01/19/2021</u>	Last 4 digits of account nu	mber <u>8006</u>			
Canton Scho	ol EMP CP					
UN Canton Scho	OI EIVIP CK	Describe the property that secure	es the claim:	\$51,622.00	\$49,147.00	\$2,475.00
Creditor's Name		2021 Chevrolet Tahoe 352		ΨΟ1,022.00	Ψ+0,1+1.00	Ψ2,470.00
		As of the date you file, the claim i	is: Chack all that			
1380 MARKE		apply.	3. Check all that			
Canton, OH 4 Number, Street, City		☐ Contingent☐ Unliquidated				
•		☐ Disputed				
Who owes the debt? Debtor 1 only	Check one.	Nature of lien. Check all that apply ☐ An agreement you made (such a	•	ured		
Debtor 2 only		car loan)	0 0	uica		
□ Debtor 1 and Debtor □ At least one of the depth of the		☐ Statutory lien (such as tax lien, n☐ Judgment lien from a lawsuit	nechanic's lien)			
Check if this claim		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Auto Lease	9		
community debt		, ,		-		
Date debt was incurred	d 09/14/2021	Last 4 digits of account nu	mber <u>3809</u>			

Debtor 1	Nicholas F Mario	ch		_	Case number (if known)		
	First Name	Middle Name	Last Name				
Debtor 2	Jeanne M. Maric	:h					
	First Name	Middle Name	Last Name				
2.3 Ha ı	rley Davidson Cre	edit Descri	be the property that secures	the claim:	\$20,973.00	\$26,725.00	\$0.00
Cred	litor's Name	2019	Harley-Davidson FLH	T 6,855			
		miles	•				
PO	BOX 21829	As of t apply.	he date you file, the claim is	: Check all that			
Ca	rson City, NV 897	21 ☐ Con	tingent				
Num	ber, Street, City, State & Zip		quidated				
Who owe	es the debt? Check one	☐ Disp	outed e of lien. Check all that apply.				
☐ Debtor☐ Debtor	1 only	☐ An a	agreement you made (such as r loan)		ecured		
Debtor	1 and Debtor 2 only	☐ Stat	tutory lien (such as tax lien, me	echanic's lien)			
=	t one of the debtors and if this claim relates to	=	gment lien from a lawsuit er (including a right to offset)	A45 1 55	_		
_	nunity debt	a ZiOur	er (moldding a right to onset)	Auto Loa	<u> </u>		
Date debt	was incurred _05/10	0/2022	Last 4 digits of account nun	nber <u>2205</u>			
Add the	dollar value of your o	atrica in Calumn A	on this page. Write that nur	nhar hara:	\$404.00C.0		
	-		ar value totals from all pages		\$104,066.0	<u>U</u>	
	at number here:	iorni, add the dolla	ii value totais il olii ali pages	•	\$104,066.0	0	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

H	in this inforr	nation to identify your	case:					
Del	otor 1	Nicholas F Marich						
		First Name	Middle	e Name	Last Name			
	otor 2	Jeanne M. Marich						
(Spc	ouse if, filing)	First Name	Middle	e Name	Last Name			
Uni	ted States Ba	nkruptcy Court for the:	NORTHE	RN DISTRICT OF OF	HIO			
_								
	se number _ nown)						Chook	if this is on
(II KI	iowii)							if this is an ed filing
								J
<u>Of</u> 1	<u>ficial Forn</u>	<u>n 106E/F</u>						
Sc	hedule E	/F: Creditors W	ho Hav	e Unsecured	Claims			12/15
		d accurate as possible. Us						
		racts or unexpired leases tory Contracts and Unexpi						
		ors Who Have Claims Seci						
left.	Attach the Con	tinuation Page to this pag						
		nber (if known).						
		II of Your PRIORITY Un						
1.	Do any creditor ☐ No. Go to P	ors have priority unsecured	d claims aga	inst you?				
	Yes.	art Z.						
2.	_	priority unsecured claims	. If a creditor	has more than one prior	rity unsecured claim, lis	t the creditor separate	ly for each claim. For	each claim listed,
		pe of claim it is. If a claim ha						
		e claims in alphabetical orde than one creditor holds a pa				o priority unsecured cia	aims, fill out the Contir	luation Page of
		ation of each type of claim, s						
	(* 2. 2 2	,, -			,	Total claim	Priority	Nonpriority
	٦						amount	amount
2.1		Revenue Service		Last 4 digits of account	nt number	\$7,528.67	\$7,528.67	\$0.00
	Priority Cr	editor's Name		\A/\ 4b d.b. 4				
	F.O. DO	X 7 340		When was the debt in	currea?			
	Philade	lphia, PA 19101						
	Number S	treet City State Zip Code		As of the date you file	, the claim is: Check a	ll that apply		
	Who incurred	d the debt? Check one.		☐ Contingent				
	Debtor 1 o	,		Unliquidated				
	☐ Debtor 2 o	•		Disputed				
		nd Debtor 2 only		Type of PRIORITY uns				
	=	e of the debtors and anothe		☐ Domestic support ob☒ Taxes and certain ot	•	government		
	debt	his claim is for a commu	illy	☐ Claims for death or p				
		subject to offset?		Other. Specify				
	⊠ No □ Yes							
2.2	Region	al Income Tax Agend	:y	Last 4 digits of accoun	nt number	\$428.22	\$428.22	\$0.00
	,	editor's Name						
		(477900	47	When was the debt in	curred?		-	
		iew Heights, OH 4414 treet City State Zip Code	+/	As of the date you file	the claim is: Check a	II that apply		
		d the debt? Check one.		☐ Contingent	, the claim for check a	ш шас арргу		
	Debtor 1 o			☐ Unliquidated				
	Debtor 2 o	=		☐ Disputed				
		nd Debtor 2 only		Type of PRIORITY uns	ecured claim:			
		e of the debtors and anothe	r	☐ Domestic support ob				
		his claim is for a commu	nity	∑ Taxes and certain of the second certain certain of the second certain cer				
	debt			☐ Claims for death or p	personal injury while yo	u were intoxicated		
	Is the claim s ☑ No	subject to offset?		Other. Specify				
	☐ Yes							

Debto Debto	or 1 Nicholas F Marich Jeanne M. Marich	Case number (if known)		
2.3	Summit County CSEA	Last 4 digits of account number \$3,300.00 \$	0.00	\$3,300.00
	Priority Creditor's Name 175 S. Main St., 5th FI. Akron, OH 44308	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
,	Who incurred the debt? Check one.	□ Contingent		
	☑ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	□ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ At least one of the debtors and another	☑ Domestic support obligations		
	— ☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated		
[s the claim subject to offset? ☑ No ☐ Yes	Other. Specify		
4. Li	o any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each or secured claim.	ms against you?	cluded in P	art 1. If more
2.	•	si cleuliois in Part 3.11 you have more than three horipholity unsecured claims ill out the	Total cla	Ü
4.1	Affirm Inc.	Last 4 digits of account number CV5S		\$2,484.00
	Nonpriority Creditor's Name 650 California St. Fl. 12 San Francisco, CA 94108	When was the debt incurred? 07/18/2022		· ,
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	□ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset? ⊠ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	☐ Debts to pension or profit-straining plans, and other strained debts		
		· · · · · · · · · · · · · · · · · · ·	<u>-</u>	
4.2	Akron Children's Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$363.00
	One Perkins Square Akron, OH 44308	When was the debt incurred?	-	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No Subject to onset?	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	☐ Debts to perision of profitesharing plans, and other similar debts		
			_	

Debtor Debtor	1 Nicholas F Marich 2 Jeanne M. Marich		Case number (if known)	
4.3	Bank of America	Last 4 digits of account number	1307	\$6,019.00
	Nonpriority Creditor's Name PO BOX 982238 El Paso, TX 79998	When was the debt incurred?	12/29/2008	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	Yes	☐ Debts to persion of profits sharing ☐ Other. Specify ☐ Credit card		
4.4	Bank of America	Last 4 digits of account number	0066	\$12,798.00
	Nonpriority Creditor's Name PO BOX 982238 EI Paso, TX 79998	When was the debt incurred?	07/30/2003	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	☑ Other. Specify Credit card		
4.5	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	0310	\$1,185.00
	PO BOX 8803 Wilmington, DE 19899	When was the debt incurred?	06/03/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharin		
	☐ Yes		purchases	

Debto Debto	n 1 Nicholas F Marich n 2 Jeanne M. Marich		Case number (if known)	
4.6	Canton School EMP CR UN	Last 4 digits of account number	3753	\$8,603.00
	Nonpriority Creditor's Name 1380 Market Ave. N Canton, OH 44714	When was the debt incurred?	01/31/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	⊠ No □ Yes	☐ Debts to pension or profit-sharin ☑ Other. Specify	g plans, and other similar debts	
4.7	Capital One	Last 4 digits of account number	3914	\$3,588.00
	Nonpriority Creditor's Name PO BOX 31293 Salt Lake City, UT 84131	When was the debt incurred?	11/28/2018	
	Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Credit card	d claim: ration agreement or divorce that you did not g plans, and other similar debts	
4.8	Capital One Nonpriority Creditor's Name	_ Last 4 digits of account number	7805	\$1,000.00
	PO BOX 31293 Salt Lake City, UT 84131	When was the debt incurred?	03/12/2016	
	Number Street City State Zip Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	As of the date you file, the claim Contingent Unliquidated Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☑ Other. Specify **Credit card purchases**

debt

⊠ No

☐ Yes

Is the claim subject to offset?

Debtor Debtor	1 Nicholas F Marich 2 Jeanne M. Marich		Case number (if known)	
4.9	Captial One	Last 4 digits of account number	7805	\$323.00
	Nonpriority Creditor's Name PO BOX 31293 Salt Lake City, UT 84131	When was the debt incurred?	08/11/2023	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☑ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	-
4.1 0	CBNA Nonpriority Creditor's Name	Last 4 digits of account number	6938	\$8,317.00
	PO BOX 6497 Sioux Falls, SD 57117	When was the debt incurred?	05/19/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset? ☑ No	 ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin 	ration agreement or divorce that you did not	
	☐ Yes	☑ Other. Specify Credit card	• •	-
4.1	Citi Bank - Best Buy Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	5614	\$7,411.16
	PO BOX 9001007 Louisville, KY 40290	When was the debt incurred?		-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	n plans, and other similar debts	
	☐ Yes	☐ Other. Specify Credit card		
	□ 1€9	M Other, Specify Orealt Card	paronasos	_

Debtor Debtor	Nicholas F Marich Jeanne M. Marich		Case number (if known)	
4.1 2	Cleveland Clinic	Last 4 digits of account number	5367	\$642.00
	Nonpriority Creditor's Name	_		
	PO BOX 93766	When was the debt incurred?		
	Cleveland, OH 44101	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? No. No.	report as priority claims	a plane, and other similar debte	
	⊠ No	☐ Debts to pension or profit-sharin	= :	
	Yes	☑ Other. Specify		
4.1				
3	Credit First NA/Firestone	_ Last 4 digits of account number	1742	\$1,291.00
	Nonpriority Creditor's Name PO BOX 81083		08/12/2018	
		When was the debt incurred?	00/12/2010	
	Cleveland, OH 44181	As of the date you file, the claim	is: Chack all that apply	
	Number Street City State Zip Code	As of the date you me, the claim	is. Oneck all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alains.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	4:	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes		g plans, and other similar debts	
4.1				
4	Credit One Bank	_ Last 4 digits of account number	4796	\$2,124.00
	Nonpriority Creditor's Name		05/00/0040	
	PO BOX 98875	When was the debt incurred?	05/30/2016	
	Las Vegas, NV 89193			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☑ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? No. No.	report as priority claims	a plane, and other similar 4-44-	
	⊠ No	Debts to pension or profit-sharin	g pians, and other similar debts	

☐ Yes

Debtor Debtor	Nicholas F Marich Jeanne M. Marich		Case number (if known)	
4.1			· ,	
5	Credit One Bank	_ Last 4 digits of account number	6645	\$1,383.00
	Nonpriority Creditor's Name PO BOX 98875	When was the debt incurred?	11/09/2017	
,	Las Vegas, NV 89193	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	☑ Other. Specify Credit card	purchases	
4.1				
6	Dept. of Education/NELNET	Last 4 digits of account number	0000	\$3,512.00
	Nonpriority Creditor's Name PO BOX 82561	When was the debt incurred?	03/06/2018	
	Lincoln, NE 68501	- As a fall of the state of the		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☑ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Don't of Edward on MELNET		0000	¢4 404 00
7	Dept. of Education/NELNET	_ Last 4 digits of account number	0000	\$1,131.00
	Nonpriority Creditor's Name PO BOX 82561	M/1	03/06/2018	
		When was the debt incurred?	03/00/2018	
	Lincoln, NE 68501	As of the date you file, the claim	in. Charle all that apply	
	Number Street City State Zip Code	As of the date you me, the claim	в. Спеск ан тат арру	
	Who incurred the debt? Check one.	П Оti		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharin	g plans, and other similar debts	
			J F, and care, comman dobto	

☐ Yes

Other. Specify

Debto	or 2 Jeanne M. Marich		Case number (if known)	
4.1 8	Dept. of Education/NELNET	_ Last 4 digits of account number	0000	\$1,171.00
	Nonpriority Creditor's Name PO BOX 82561 Lincoln, NE 68501	When was the debt incurred?	06/17/2018	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	-		
	☐ Debtor 1 only	☐ Contingent		
	☑ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
1.1 9	Dept. of Education/NELNET	Last 4 digits of account number	0000	\$1,260.00
	Nonpriority Creditor's Name	_		•
	PO BOX 82561	When was the debt incurred?	06/17/2018	
	Lincoln, NE 68501	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g pians, and other similar debts	
l.2)	Dept. of Education/NELNET Nonpriority Creditor's Name	_ Last 4 digits of account number	0000	\$2,343.00
	PO BOX 82561	When was the debt incurred?	02/03/2019	
	Lincoln, NE 68501	When was the debt incurred?	02/00/2010	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, , , ,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	

debt

⊠ No

☐ Yes

☐ Other. Specify _

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 \square Check if this claim is for a community

Is the claim subject to offset?

	2 Jeanne M. Marich		Case number (if known)	
	Dept. of Education/NELNET	Last 4 digits of account number	0000	\$301
	Nonpriority Creditor's Name		00/45/2040	
	PO BOX 82561 Lincoln, NE 68501	When was the debt incurred?	09/15/2019	
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. One on all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☑ Student loans	u cium.	
	debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	☑ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
	Dont of Education/NEI NET		0000	¢4.241
_	Dept. of Education/NELNET Nonpriority Creditor's Name	_ Last 4 digits of account number		\$4,21
	PO BOX 82561	\A/\	09/15/2019	
	Lincoln, NE 68501	When was the debt incurred?	09/13/2019	
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. One on all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans	u Claiii.	
	debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
	Dept. of Education/NELNET	_ Last 4 digits of account number	0000	\$4,859
	Nonpriority Creditor's Name		00/45/2040	
	PO BOX 82561	When was the debt incurred?	09/15/2019	
-	Lincoln, NE 68501	As of the date you file the claim	is: Chack all that apply	
	Number Street City State Zip Code	As of the date you file, the claim	ю. Опсок ан шасарріу	
	Who incurred the debt? Check one.	Continuent		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	THE RESERVOIR OF THE CHOTOLS AND AUCTURE	Type of NUMERIURITY UDSECURE	o ciano	

Other. Specify

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community debt

Is the claim subject to offset?

⊠ No

☐ Yes

Dept. of Education/NELNET	Last 4 digits of account number	0000	\$2,898
Nonpriority Creditor's Name PO BOX 82561	When was the debt incurred?	06/15/2020	
Lincoln, NE 68501	when was the debt incurred?	00/10/2020	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	⊠ Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	J	
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	☐ Other. Specify		
PO BOX 82561 Lincoln, NE 68501	When was the debt incurred?	06/15/2020	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify		
Discover Bank	Last 4 digits of account number	0008	\$13,120
Nonpriority Creditor's Name		07/00/0040	
PO BOX 15316	When was the debt incurred?	07/23/2019	
Wilmington, DE 19850			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one	-		

☐ Debtor 1 only

☑ Debtor 2 only

debt

⊠ No

☐ Yes

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 $\hfill \square$ At least one of the debtors and another

☐ Check if this claim is for a community

☐ Contingent

☐ Disputed

☐ Unliquidated

☐ Student loans

Other. Specify

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	or 2 Jeanne M. Marich		Case number (if known)	
4.2 7	Discover Bank	Last 4 digits of account number	1100	\$1,652.00
	Nonpriority Creditor's Name			
	PO BOX 30939	When was the debt incurred?	07/02/2017	
	Salt Lake City, UT 84130		: Ob It - II 4b -4b	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	Contingent		
	☑ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset? ☑ No	report as priority claims	a plane, and other similar debte	
		☐ Debts to pension or profit-sharin		
	☐ Yes	☑ Other. Specify Credit card	purchases	
4.2				
8	Discover Bank	Last 4 digits of account number	1100	\$1,715.00
	Nonpriority Creditor's Name	_		
	PO BOX 30939	When was the debt incurred?	04/15/2016	
	Salt Lake City, UT 84130	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	□ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharin	= -	
	☐ Yes	Other. Specify Credit card	purchases	
4.2				
9	JPMCB Card	Last 4 digits of account number	6684	\$1,102.00
	Nonpriority Creditor's Name	_		
	PO BOX 15369	When was the debt incurred?	05/13/2012	
	Wilmington, DE 19850	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☑ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		7 .		

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

⊠ No

☐ Yes

Debto Debto	or 1 Nicholas F Marich or 2 Jeanne M. Marich		Case number (if known)	
.3	JPMCB Card		6684	\$1,421.0
)	Nonpriority Creditor's Name	_ Last 4 digits of account number	0004	\$1,421.0
	PO BOX 15369	When was the debt incurred?	07/21/2016	
	Wilmington, DE 19850	When was the dest meaned?	<u> </u>	
	Number Street City State Zip Code	 As of the date you file, the claim i 	is: Check all that apply	
	Who incurred the debt? Check one.	• ,	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans	a ciumi.	
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	 □ Yes	☐ Other Specify Credit card		
<u>—</u>				
.3	JPMCB Card	Last 4 digits of account number	4018	\$3,278.0
	Nonpriority Creditor's Name		44/00/0040	
	PO BOX 15369	When was the debt incurred?	11/23/2012	
	Wilmington, DE 19850			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☑ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☑ Other. Specify Credit card	purchases	
.3				
	Kohls/Capone Nonpriority Creditor's Name	_ Last 4 digits of account number	9305	\$722.0
	PO BOX 3115	When was the debt incurred?	07/30/2016	
	Milwaukee, WI 53201	when was the debt incurred?	01/30/2010	
		As of the date you file, the claim in the claim is a second or control or	is: Chock all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you life, the Claim	. Oncon all triat apply	
		Contingent		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaims.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
	Check if this claim is for a community	Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

⊠ No

☐ Yes

Other. Specify _
_

Debtor Debtor	1 Nicholas F Marich 2 Jeanne M. Marich		Case number (if known)	
4.3	Merrick Bank Corp. Nonpriority Creditor's Name	Last 4 digits of account number	6316	\$866.00
	PO BOX 9201	When was the debt incurred?	04/28/2021	
	Old Bethpage, NY 11804	<u>-</u>		
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans	a Claiii.	
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☑ Other. Specify Credit card	purchases	
4.3				
4	National Credit Adjusters, L.L.C.	Last 4 digits of account number	25	\$3,636.00
	Nonpriority Creditor's Name 327 W. 4th. Ave.		05/01/2019	
	Hutchinson, KS 67501	When was the debt incurred?	03/01/2019	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 auto you, o.a	er enter an anat apply	
	☑ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.3	NELNET/Education Financial		6839	\$8.328.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	0039	\$0,320.00
	PO BOX 82561	When was the debt incurred?	11/16/2006	
	Lincoln, NE 68501	When was the debt incurred:	11110/2000	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	,	117	
	Debtor 1 only	☐ Contingent		
	☑ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	⊠ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	•	

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

⊠ No

☐ Yes

Other. Specify

NELNET/Education Financial	_ Last 4 digits of account number	6839	\$6,16
Nonpriority Creditor's Name PO BOX 82561		11/16/2006	
Lincoln, NE 68501	When was the debt incurred?	11/16/2006	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	⊠ Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
⊠ No	☐ Debts to pension or profit-sharing		
 □ Yes	☐ Other. Specify	~ 1	
101 Crossways Park Dr. W. Woodbury, NY 11797	When was the debt incurred?	06/05/2014	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, to or the date you me, the claim.	er enest an alat apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa		
Is the claim subject to offset?	report as priority claims		
⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☑ Other. Specify Credit card	purchases	
SYNCB/AMER EAGLE DC	Last 4 digits of account number	8431	\$3,24
Nonpriority Creditor's Name	_		
PO BOX 965005	When was the debt incurred?	01/30/2017	
Orlando, FL 32896	_		
	_		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	

Official Form 106 E/F

☐ Debtor 1 only

☑ Debtor 2 only

debt

⊠ No

☐ Yes

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 $\hfill \square$ At least one of the debtors and another

☐ Check if this claim is for a community

☐ Contingent

☐ Disputed

☐ Unliquidated

☐ Student loans

report as priority claims

Type of NONPRIORITY unsecured claim:

 $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

SYNCB/Car Care SYN Car C	_ Last 4 digits of account number	0159	\$1,51
Nonpriority Creditor's Name PO BOX 965036		01/04/2017	
Orlando, FL 32896	When was the debt incurred?	01/04/2017	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
☑ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	J	
⊠ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	☑ Other. Specify		
PO BOX 965005 Orlando, FL 32896	When was the debt incurred?	08/31/2014	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
☑ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
⊠ No	☐ Debts to pension or profit-sharin		
Yes	☑ Other. Specify Credit card	l purchases	
SYNCB/MC	_ Last 4 digits of account number	4363	\$7,24
Nonpriority Creditor's Name			
PO BOX 965005	When was the debt incurred?	03/22/2015	
Orlando, FL 32896	_		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			

debt
Is the claim subject to offset?

☑ No
☐ Yes

☐ Debtor 1 only ☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

 $\hfill \square$ At least one of the debtors and another

☐ Check if this claim is for a community

Type of NONPRIORITY unsecured claim:

☐ Contingent

☐ Disputed

☐ Unliquidated

☐ Student loans

Jeanne M. Marich	Case number (if known)		
SYNCB/PPC	_ Last 4 digits of account number	4419	\$2,
Nonpriority Creditor's Name PO BOX 530975		02/07/2017	
PO BOX 530975 Orlando, FL 32896	When was the debt incurred?	02/07/2017	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	із. Опеск ан шасарріу	
	Contingent		
☐ Debtor 1 only	☐ Contingent ☐ Unliquidated		
Debtor 2 only	_ ,		
Debtor 1 and Debtor 2 only	Disputed	d alains.	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	a ciaim:	
☐ Check if this claim is for a community	☐ Student loans		
s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
⊠ No	☐ Debts to pension or profit-sharin	a plans, and other similar debts	
□ Yes	☐ Other. Specify Credit card		
	Zi otnor. opoony		
SYNCB/PPC	Land A. Walter of a constant of a contract	4419	\$2.
Nonpriority Creditor's Name	Last 4 digits of account number	4419	ą∠,
PO BOX 530975	When was the debt incurred?	07/10/2018	
Orlando, FL 32896	when was the debt incurred?	0171072010	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	710 of the date you me, the claim	on one an trial apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	_ '	ما مامامه	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	u Cialifi.	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
⊠ No	Debts to pension or profit-sharin	g plans, and other similar debts	
_	☐ Debts to perision or profits raining ☐ Other. Specify Credit card		
Yes	△ Otner. Specify Oreun Card	Pul 0110363	
OVNOR/RRMO		4050	^
SYNCB/PPMC	_ Last 4 digits of account number	<u> 1853 </u>	\$2 ,
Nonpriority Creditor's Name		06/22/2040	
PO BOX 965005	When was the debt incurred?	06/23/2019	
Orlando, FL 32896			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		

Official Form 106 E/F

debt

⊠ No

☐ Yes

☑ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 $\hfill \square$ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Disputed

☐ Student loans

Type of NONPRIORITY unsecured claim:

☑ Other. Specify **Credit card purchases**

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Jeanne M. Marich		Case number (if known)	
SYNCB/SYNC Bank Sport	Last 4 digits of account number	2052	\$3,088.
Nonpriority Creditor's Name C/O PO BOX 965036	Miles	06/29/2014	
Orlando, FL 32896	When was the debt incurred?	00/29/2014	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0 auto you, o.u	er enest an alat apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	_	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	and agreement of arrondo that you aid not	
⊠ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☑ Other Specify		
PO BOX 673 Minneapolis, MN 55440 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	11/05/2017 is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim i	S. Oneok all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	-	
⊠ No	☐ Debts to pension or profit-sharing	• •	
Yes	☑ Other. Specify Credit card	purchases	
The Handerstein Mad Bank		0774	00.400
The Huntington Natl Bank	Last 4 digits of account number	3754	\$2,192
Nonpriority Creditor's Name PO BOX 1558	Miles was the debt in access 10	08/09/2017	
I O DOV 1990	When was the debt incurred?	00/03/2011	
Columbus, OH 43216			

Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated □ Debtor 1 and Debtor 2 only ☐ Disputed $\hfill \square$ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community ☐ Student loans debt $\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ⊠ No

☐ Yes

Debtor 1 Debtor 2	Nicholas Jeanne M			Case nu	mber (if knov	vn)	
		gton Natl Bank	Last 4 digits of account number	3347			\$1,216.00
	Nonpriority Cred PO BOX 15	58	When was the debt incurred?	07/22	/2016		
_	Columbus,	OH 43216 City State Zip Code	As of the date you file, the claim	is: Check	all that apply	,	
		he debt? Check one.	710 of the date you me, the olding	io. Oncon	an that apply		
	☐ Debtor 1 only	/	☐ Contingent				
	Debtor 2 only		Unliquidated				
	☐ Debtor 1 and	-	Disputed				
	_	of the debtors and another sclaim is for a community	Type of NONPRIORITY unsecure ☐ Student loans	a ciaim:			
	debt	ciain is for a community	☐ Obligations arising out of a sepa	ration agre	eement or div	vorce that you did not	
1	ls the claim sul	oject to offset?	report as priority claims	iration agri	ouriont or an	voice that you did not	
	⊠ No		☐ Debts to pension or profit-sharin	g plans, a	nd other simi	lar debts	
	☐ Yes		☑ Other. Specify Credit card	l purcha	ases		
4.4	The Hunting	gton Natl Bank	Last 4 digits of account number	2448			\$9.880.00
	Nonpriority Cred		Last 4 digits of account number				Ψ0,000.00
	PO BOX 15		When was the debt incurred?	04/05	/2017		
	Columbus,	OH 43216		'			
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply	1	
		he debt? Check one.	Contingent				
	□ Debtor 1 only □ Debtor 2 only		☐ Contingent☐ Unliquidated				
	Debtor 1 and		☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
	debt Is the eleim out	signatus officiat?	Obligations arising out of a sepa	ration agre	eement or div	vorce that you did not	
	ls the claim sul ⊠ No	oject to onset?	report as priority claims Debts to pension or profit-sharin	n nlane a	nd other simi	ilar dehts	
	□ Yes		☑ Other. Specify Credit card			iai debis	
	□ res		Other. Specify Oreal Care	i parciic	1000		
4.5 0	Upgrade Ind	: .	Last 4 digits of account number	5242			\$1,125.00
	Nonpriority Cred	litor's Name	· ·				
_	2 N. Central Phoenix, A <mark>z</mark>	2 85004	When was the debt incurred?	03/13/			
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply	1	
		he debt? Check one.	Contingent				
	☑ Debtor 1 only ☑ Debtor 2 only		☐ Contingent ☐ Unliquidated				
	Debtor 1 and		☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
	debt Is the claim sul	oject to offset?	Obligations arising out of a sepa report as priority claims	ration agre	eement or div	vorce that you did not	
	⊠ No	oject to onset:	Debts to pension or profit-sharin	a plans, a	nd other simi	ilar debts	
	 □ Yes		Other. Specify				
Part 3:	List Others	to Be Notified About a Debt	That You Already Listed				
is tryin have m	g to collect from	m you for a debt you owe to some	ut your bankruptcy, for a debt that yone else, list the original creditor in u listed in Parts 1 or 2, list the addiubmit this page.	Parts 1 o	r 2, then list	t the collection agency	here. Similarly, if you
Part 4:	Add the Ar	nounts for Each Type of Unse	cured Claim				
	the amounts of unsecured cla		s. This information is for statistical	reporting	purposes o	nly. 28 U.S.C. §159. Ad	ld the amounts for each
						Total Claim	
Total clai	6a. ims	Domestic support obligations		6a.	\$	3,300.00	- -
from Par		Taxes and certain other debts yo	u owe the government	6b.	\$	7,956.89	

Debtor 2 <u>Je</u>	anne iv	I. Marich	Case n	umber (if known)	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	11,256.89
				Tot	al Claim
	6f.	Student loans	6f.	\$	43,825.00
al claims n Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	129,867.16

Fill	in this i	nformation to identify your	case:			
De	btor 1	Nicholas F Marich	1			
		First Name	Middle Name	Last Name	-	
	btor 2	Jeanne M. Marich				
(Spo	ouse if, filing) First Name	Middle Name	Last Name		
Uni	ited State	s Bankruptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Ca	se numbe	er				
(if kr	nown)				☐ Check if this is an	
					amended filing	
Of	ficial	Form 106G				
Sc	chedu	le G: Executory	Contracts and	d Unexpired Leases	12/15	j
info	rmation.		opy the additional page, f	are filing together, both are equally res ill it out, number the entries, and attac		
1.	☐ Ño. (rm with the court with your	other schedules. You have nothing else leases are listed on <i>Schedule A/B:Prope</i>		
2.	exampl			re the contract or lease. Then state wh for this form in the instruction booklet for		;
	Persor	n or company with whom yo Name, Number, Street, City		ase State what the contract or le	ase is for	
2	15	rcia H. Pearson Trustee 72 McTweed Lane w Franklin, OH 44203		Residential Lease Agre	ement	

					i
Fill in this inf	ormation to identify your	case:			
Debtor 1	Nicholas F Maric		Loot Name		
Dobtor 2		Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Jeanne M. Maric First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					Check if this is an amended filing
	orm 106H le H: Your Cod	ebtors			12/15
Concaa	ic II. Tour God	CDCOIS			12/13
people are fili fill it out, and your name an 1. Do you	ng together, both are equ	ally responsible for supposes on the left. Attack). Answer every question	olying correct information the Additional Page to	n. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Page op of any Additional Pages, write
☐ No ⊠ Yes					
	the last 8 years, have yo California, Idaho, Louisiana				rty states and territories include)
⊠ No. Go □ Yes. D	to line 3. id your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2 a	again as a codebtor only 5D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make su	ire you have listed	ng with you. List the person show the creditor on Schedule D (Offici , Schedule E/F, or Schedule G to f
	umn 1: Your codebtor e, Number, Street, City, State and 2	IP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
157	rcia H. Pearson 72 McTweed Lane w Franklin, OH 44203			☐ Schedule D, ☐ Schedule E/F ☐ Schedule G Bank of Americ	-, line <u>4.4</u>

Fill	in this information to	o identify your ca	ase:						
Del	otor 1	Nicholas F N	larich			_			
	otor 2 ouse, if filing)	Jeanne M. M	arich			_			
Uni	ted States Bankrupt	tcy Court for the	NORTHERN DISTRIC	CT OF OHIO		_			
-	se number nown)								
0	fficial Form	106I					MM / DD/ Y		•
	chedule I: `		ome				, 22, .		12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	ible. If two married peo are married and not fili r spouse is not filing wi On the top of any additi	ng jointly, and your s ith you, do not includ	pouse i le inforr	s livi natio	ng with you, incl n about your spo	ude information abou ouse. If more space is	t your needed,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	2 or non-filing spouse	
	If you have more t		Employment status*				⊠ Emplo	oyed	
	information about employers.	1 3					☐ Not e	mployed	
	Include part-time,	seasonal or	Occupation	Cook			Physica	al therapy assistant	:
	self-employed wor		Employer's name	Manchester Tav	ern		Summa		
	Occupation may ir or homemaker, if i		Employer's address	6174 Mancheste Akron, OH 44319	r Rd			Forge Street OH 44304	
Par	t 2: Give Det	ails About Mor	How long employed the		chment	for A		! years yment Information	
Esti	<u> </u>	me as of the da	te you file this form. If yo	ou have nothing to rep	ort for an	ıy line	e, write \$0 in the sp	pace. Include your non-f	iling spouse
	u or your non-filing s e space, attach a se		ore than one employer, co this form.	ombine the information	ı for all e	mplo	yers for that perso	on on the lines below. If	you need
							For Debtor 1	For Debtor 2 or non-filing spouse	
2.	, ,	0 /	ry, and commissions (becalculate what the month)	, ,	2.	\$_	1,949.93	\$\$,193.25	-
3.	Estimate and list	monthly overt	me pay.		3.	+\$_	0.00	+\$30.36	-
4.	Calculate gross I	Income. Add lir	e 2 + line 3.		4.	\$_	1,949.93	\$5,223.61_	

Case number (if known)

				Fo	r Debtor 1		Debtor 2 or -filing spouse	
	Сору	line 4 here	4.	\$_	1,949.93	\$	5,223.61	
5.	List a	ıll payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	316.36	\$	903.93	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	<u>*</u> —	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Simple	5h.+	· –	0.00 +	· —	2.36	
	JII.	Meals	_ 511.1	\$_	0.00	\$	15.82	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.	\$ \$	316.36	*— \$	920.93	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,633.57	\$	4,302.68	
8.	List a 8a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$_	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$_	0.00 +	\$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		alate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,633.57 + \$_	4,3	302.68 = \$ 5,9	36.25
11.	Includ other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a fy:	depen				Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines						36.25
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	?				monthly inc	come
		Yes. Explain:						

Debtor 1	Nicholas F Marich		
	Jeanne M. Marich	Case number (if known)	

Official Form B 6I Attachment for Additional Employment Information

Spouse		
Occupation	Assistant	
Name of Employer	Manchester Animal Clinic	
How long employed	2	
Address of Employer	5885 Manchester Rd.	
	Akron, OH 44319	

Fill	in this information	n to identify yo	our case:			ı			
Deb	otor 1 N	licholas F N	larich			Ch	neck	if this is:	
Deb	_	eanne M. M] A	an amended filing a supplement shov	ving postpetition chapter 1
(Sp	ouse, if filing)						е	xpenses as of the	following date:
Unit	ed States Bankrupto	cy Court for the:	NORTH	IERN DISTRICT OF OH	10		N	MM / DD / YYYY	
	e number nown)								
]			
0	fficial Forn	n 106J							
S	chedule J	: Your I	 Exper	ises					12/1:
Be info	as complete and	d accurate as	possible eded, attac	If two married people					
Par	t 1: Describe	Your House	hold						
1.	Is this a joint c								
	No. Go to linYes. Does □		in a separ	ate household?					
	⊠ No □ Yes.	Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expens</i>	es for Separate Hous	ehold of D	ebto	or 2.	
2.	Do you have d	ependents?	□No						
	Do not list Debt Debtor 2.	or 1 and	⊠ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		_	Dependent's age	Does dependent live with you?
	Do not state the dependents nar				Daughter			11 mon.	□ No ☑ Yes □ No
					Daughter			4	⊠ Yes
					Son			12	□ No ⊠ Yes □ No
					Son			13	⊠ Yes
3.	Do your expen expenses of per yourself and ye	eople other tl	han 🗌	No Yes					
Par	t 2: Estimate	Your Ongoi	na Monthi	v Expenses					
Est	imate your expe	enses as of yo	our bankr	uptcy filing date unless					apter 13 case to report of the form and fill in the
Inc	lude expenses p	aid for with r	non-cash	government assistance	if you know the				
	ue of such assis ficial Form 106l.)		ve includ	ed it on Schedule I: Yo	ur İncome			Your exp	ansas
(01	nciai i oini iooi.,	,					_	Tour exp	e113e3
4.	The rental or h payments and a			ses for your residence r lot.	. Include first mortgag		\$		200.00
	If not included	in line 4:							
	4a. Real esta	ate taxes				4a.	\$		0.00
		homeowner's	-			4b.			0.00
			•	ipkeep expenses		4c.	\$		200.00
5.				dominium dues our residence, such as l	nome equity leans	4d.			0.00 0.00
J.	Auditional IIIOI	i igage payille	onto for yo	our residence, Such as f	Torrie equity IDalis	5.	\$		0.00
6.	Utilities:	, heat natura	al dae			0.	Φ		200.00
	-	y, heat, natura ewer, garbage	-			6a. 6b.			
	•			satellite, and cable servic	es	6c.			
	•	pecify: Othe				6d.			65.00

Debtor 1 Debtor 2	Nicholas F Marich Jeanne M. Marich	Case num	ber (if known)	
			. ()	
	I and housekeeping supplies	7.	\$	700.00
Child	Icare and children's education costs	8.	\$	245.00
Clot	ning, laundry, and dry cleaning	9.		125.00
O. Pers	onal care products and services	10.	\$	0.00
I. Medi	cal and dental expenses	11.	\$	300.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	500.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	· 	0.00
	itable contributions and religious donations	14.		0.00
i. Insu Do n	rance. ot include insurance deducted from your pay or included in lines 4 or 20.		¥	
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	_	0.00
	Vehicle insurance	15c.		0.00
	Other insurance. Specify: Life, Health, and Auto	15d.	_	411.00
	 s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Taxes (installment plan) 	 16.	\$	201.00
	Illment or lease payments:	<u></u>		_
	Car payments for Vehicle 1	17a.	·	679.00
	Car payments for Vehicle 2	17b.	\$	1,038.00
17c.	Other. Specify: Harley Davidson	17c.	•	526.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report acted from your pay on line 5, Schedule I, Your Income (Official Form 106		\$	382.78
	r payments you make to support others who do not live with you.	,	\$	0.00
Spec	ifv [.]	19.	-	
. Othe	r real property expenses not included in lines 4 or 5 of this form or on So	chedule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	_	0.00
	Homeowner's association or condominium dues	20e.	· 	0.00
	r: Specify:		+\$	0.00
	ulate your monthly expenses Add lines 4 through 21.		\$	6 450 70
	S .	2	· 	6,158.78
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	6,158.78
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.		\$	5,936.25
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	6,158.78
23c	Subtract your monthly expenses from your monthly income.			
200.	The result is your <i>monthly net income</i> .	23c.	\$	-222.53
For exmodif		you file this	s form?	ease or decrease because of a
□ Y	es. Explain here:			

Debtor 1 Debtor 2 (Spouse if, filling) United States Bankruptcy Court for the: Nicholas F Marich First Name Middle Name Last Name Last Name Last Name Last Name Last Name Last Name NORTHERN DISTRICT OF OHIO	
First Name Middle Name Last Name Debtor 2 Jeanne M. Marich (Spouse if, filing) First Name Middle Name Last Name	
Debtor 2 Jeanne M. Marich First Name Middle Name Last Name	
(Spouse if, filing) First Name Middle Name Last Name	
(
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO	
• •	
Case number	
(if known)	☐ Check if this is an amended filing
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false state obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?	
⊠ No	
	www.untov. Datition Dunnaudawia Matina
	ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
2008/2007/	and eignature (emelair eim rie)
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaratio that they are true and correct.	on and
X /s/ Nicholas F Marich X /s/ Jeanne M. Marich	
X /s/ Nicholas F Marich Nicholas F Marich X /s/ Jeanne M. Marich Jeanne M. Marich	

Fill in th	is information	on to identify you	r case:			
Debtor 1	_	Nicholas F Mari				
Dalatan		irst Name	Middle Name	Last Name		
Debtor 2 (Spouse if,	_	leanne M. Mario irst Name	Middle Name	Last Name		
United S	states Bankru	ptcy Court for the:	NORTHERN DISTRICT (OF OHIO		
Case nu	mber					
(if known)						Check if this is an amended filing
	<u>al Form</u>					
State	ment of	Financial	Affairs for Individ	duals Filing for E	Bankruptcy	04/22
informati	ion. If more (if known). A _	e space is needed answer every que	d, attach a separate sheet to	o this form. On the top of a	e equally responsible for sup ny additional pages, write yo	
1. Wha	at is your cu	rrent marital stat	us?			
\boxtimes	Married Not married					
2. Duri	ing the last	B years, have you	lived anywhere other than	where you live now?		
	No Yes. List all	of the places you	lived in the last 3 years. Do n	ot include where you live nov	N.	
Del	btor 1:		Dates Debtor 1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
	72 Manche w Franklin		From-To: On and off sir August 18, 20 present		1	☐ Same as Debtor 1 From-To:
					nity property state or territor Rico, Texas, Washington and V	
	No Yes. Make s	sure you fill out <i>Sc</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain th	e Sources of You	ır Income			
Fill i	n the total an	nount of income yo joint case and you	mployment or from operating or received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	. 00. 7 111 111 0	no dotano.	5.14		D.1.	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar ye y 1 to Decen	ar: nber 31, 2023)		\$5,999.75		\$47,274.40
			☐ Operating a business		☐ Operating a business	

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2022)	☐ Wages, commissions, bonuses, tips	\$24,537.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☑ Operating a business		☐ Operating a business	
		\$62,019.70		\$60,043.41
	☐ Operating a business		☐ Operating a business	
For the calendar year: (January 1 to December 31, 2021)		\$58,925.25		\$40,174.89
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$16,873.25	☐ Wages, commissions, bonuses, tips	\$0.00
	○ Operating a business		☐ Operating a business	
List each source and the gross inco ☐ No ☑ Yes. Fill in the details.		, 20 modalo modalo u		
<u> </u>	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
	Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Medicaid	Unknown	Medicaid	Unknown
	WIC	Unknown	wic	Unknown
	Ohio EBT	Unknown	Ohio EBT	Unknown
For last calendar year: (January 1 to December 31, 2023)	Medicaid	Unknown	Medicaid	Unknown
	WIC	Unknown	wic	Unknown
	Ohio EBT	Unknown	Ohio EBT	Unknown
For the calendar year before that: (January 1 to December 31, 2022)		\$0.00	Personal Injury Award	\$32,293.41
Down 2: Lint Contain Downsont X	Mada Dafasa Vasa Ellad C	Darel montan		
	Made Before You Filed for			
		umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days befor ☐ No. Go to line 7	ore you filed for bankruptcy, di ′.	id you pay any creditor a total	of \$7,575* or more?	

	otor 1 otor 2		cholas F M anne M. M			Cas	se number (if known)	
	⊠ '	Yes	•	paid that creditor. Do not include payments to adjustment on 4/01/2		omestic support obli cruptcy case. hat for cases filed or	gations, such as cl	yments and the total amount you nild support and alimony. Also, do
		100.			d for bankruptcy, did you pa		al of \$600 or more	?
			□ No.	Go to line 7.				
			⊠ Yes		domestic support obligatior			you paid that creditor. Do not Also, do not include payments to an
	Cred	ditor's	s Name and	I Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Serv PO	vices BOX	k - Best B s 9001007 le, KY 402		01/01/2024	\$1,063.82	\$7,411.16	
7.	Inside corpo include suppo	ers indoration or ding of ort an No	clude your rons of which yone for a bust dilmony.	elatives; any general pa you are an officer, direc		neral partners; partner vner of 20% or more	erships of which your of their voting sec	
	Insid	der's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	inside Includ	er? de pa	yments on d	you filed for bankrupt lebts guaranteed or cos		ments or transfer	any property on a	account of a debt that benefited an
	Insid	der's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pai	rt 4:	Iden	itify Legal <i>A</i>	Actions, Repossession	ns. and Foreclosures			
9.	Withi List a modif	in 1 y Ill suc ficatio	ear before ; h matters, ir	you filed for bankrupt noluding personal injury tract disputes.	cy, were you a party in ar cases, small claims action			
		e title e nun			Nature of the case	Court or agency		Status of the case
	JEA HEII	NNE NTZI		vs GEOFF T	Dissolution of Marriage	Summit Count Relations Cour 205 S. High St	rt	☑ Pending☐ On appeal☐ Concluded
						Akron, OH 443	08	W/Children, Change of Custody

	otor 1 otor 2	Nicholas F Marich Jeanne M. Marich		Case number	(if known)	
10.		n 1 year before you filed for bankru call that apply and fill in the details be		as any of your property repossessed, foreclosed	d, garnished, attache	d, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.				
	Cred	itor Name and Address		scribe the Property	Date	Value of the property
11.	accor	n 90 days before you filed for bank unts or refuse to make a payment b No Yes. Fill in the details.	ruptcy,	did any creditor, including a bank or financial in	stitution, set off any	amounts from your
	Cred	itor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	court. <u>⊠</u> N	n 1 year before you filed for bankru -appointed receiver, a custodian, o No ⁄es		as any of your property in the possession of an er official?	assignee for the ben	efit of creditors, a
Par	t 5:	List Certain Gifts and Contribution	ns			
13.	⊠ N	n 2 years before you filed for bankr No Yes. Fill in the details for each gift.	ruptcy, c	lid you give any gifts with a total value of more t	han \$600 per person	?
		with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value
	Pers Addr	on to Whom You Gave the Gift and ress:				
14.	14. Within 2 years before you filed for bankru			did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	more Char	or contributions to charities that than \$600 ity's Name Tess (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
15.		n 1 year before you filed for bankru ter, or gambling?	ıptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other
	_	No Yes. Fill in the details.				
		cribe the property you lost and the loss occurred	Include	the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost

	otor 1	Nicholas F Marich Jeanne M. Marich			C	Case number	(if known)	
Par 16.	Within	List Certain Payments or Transfers n 1 year before you filed for bankruptoulted about seeking bankruptcy or prele any attorneys, bankruptcy petition prel	paring a banl	kruptcy pe	tition?			erty to anyone you
	_	No Yes. Fill in the details.						
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not You	transfe		value of any prop	erty	Date payment or transfer was made	Amount of payment
	2950 Suite Fairl mste	el & Company, Ltd D West Market Street, Suite G e 200 lawn, OH 44333 eel@steelcolaw.com nda Marich	Attorn	ey Fee				\$2,500.00
17.	promi	n 1 year before you filed for bankrupto ised to help you deal with your credito it include any payment or transfer that yo	ors or to make	e payment			or transfer any prop	erty to anyone who
	_	Yes. Fill in the details. on Who Was Paid ress	Descri transfe		value of any prop	erty	Date payment or transfer was made	Amount of payment
18.	transf Includ includ ☑ N	n 2 years before you filed for bankrup ferred in the ordinary course of your be both outright transfers and transfers me gifts and transfers that you have alread to you have all you have alread to you have alread to you have alread to you ha	ousiness or fi ade as securit	nancial aff y (such as	airs? the granting of a se			
	Pers Addr	on Who Received Transfer ress		ption and t ty transfer			any property or received or debts change	Date transfer was made
	Pers	on's relationship to you				paid iii ox	onango	
19.	benef ⊠ N	n 10 years before you filed for bankru ficiary? (These are often called asset-pr No Yes. Fill in the details.			ny property to a s	elf-settled tro	ust or similar devic	e of which you are a
	Nam	e of trust	Descri	ption and	value of the prope	erty transferr	ed	Date Transfer was made
Par	t 8:	List of Certain Financial Accounts, In	struments, Sa	afe Deposi	t Boxes, and Stor	age Units		
20.	sold, Include house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes. Fill in the details.	or other finan	icial accou	nts; certificates o	of deposit; sh	•	, ,
		e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits account nu		Type of accoun instrument	clo	te account was sed, sold, oved, or nsferred	Last balance before closing or transfer

	otor 1 Nicholas F Marich otor 2 Jeanne M. Marich		Case number (if known)	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for bankruptcy, a	ny safe deposit box or other deposit	ory for securities,
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p ☑ No	place other than your home within 1	year before you filed for bankruptcy	/?
	☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone. ☐ No ☑ Yes. Fill in the details.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Jeremiah T. Heintzinger 1462 McTweed Lane New Franklin, OH 44203	The J. M. Smucker Company C/O Computershare PO Box 43078 Providence, RI 02940	J.M. Smucker Company UTMA Account as fiduciary for children.	\$500.00
	Nathaniel B. Heintzinger 1462 McTweed Lane New Franklin, OH 44203	The J. M. Smucker Company C/O Computershare PO Box 43078 Providence, RI 02940	J.M Smucker Company UTMA Account as fiduciary for children	\$500.00
Par	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	apply:		
\boxtimes	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su Site means any location, facility, or property as to own, operate, or utilize it, including disposal	air, land, soil, surface water, ground bstances, wastes, or material. s defined under any environmental	dwater, or other medium, including s	tatutes or
\boxtimes	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environm	nental law?
	☑ No☑ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

	otor 1 Nicholas F Marich otor 2 Jeanne M. Marich		Case number (if known)	
25	Have you notified any governmental unit o	f any roloase of hazardous material?		
-0.	No	. any noncess of mazarassas materials		
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or ad	ministrative proceeding under any envir	onmental law? Include settlements	and orders.
	NoYes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or	Connections to Any Business		
21.	 □ A member of a limited liability com □ A partner in a partnership □ An officer, director, or managing ex □ An owner of at least 5% of the votin ☑ No. None of the above applies. Go to 	in a trade, profession, or other activity, or pany (LLC) or limited liability partnership eccutive of a corporation and or equity securities of a corporation	either full-time or part-time	er
	(Name of accountant of bookkeeper	Dates business existed	
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	etcy, did you give a financial statement to	anyone about your business? Incl	ude all financial
	NoYes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Pa	rt 12: Sign Below			
are with	ve read the answers on this <i>Statement of Fi</i> true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, o	r obtaining money or property by fr	
	Nicholas F Marich	/s/ Jeanne M. Marich		
	cholas F Marich Inature of Debtor 1	Jeanne M. Marich Signature of Debtor 2		
Da	teJanuary 22, 2024	Date		
Did ⊠ N □ N	you attach additional pages to <i>Your Statem</i> √es	ent of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 1	07)?
⊠ 1	you pay or agree to pay someone who is no No Yes. Name of Person Attach the <i>Bankro</i>			

Fill in this infor	mation to identify yo	our case:			
Debtor 1	Nicholas F Ma	rich			
	First Name	Middle Name	Last Name		
Debtor 2	Jeanne M. Mar	ich			
(Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the	e: NORTHERN DISTRIC	T OF OHIO		
Case number (if known)					heck if this is an mended filing
Official Fo		ion for Individ	uals Filing Under	Chapter 7	12/15
☑ creditors hav ☑ you have least You must file th	re claims secured by sed personal proper is form with the cou	ty and the lease has not ex rt within 30 days after you			

on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Ally Financial name: Description of property 34,573 miles	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	□ No ⊠ Yes
Creditor's Canton School EMP CR UN name: Description of property miles securing debt:	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	□ No ⊠ Yes
Creditor's Harley Davidson Credit name: Description of property 6,855 miles securing debt:	 ☑ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	⊠ No □ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

	otor 1 Nicholas otor 2 Jeanne M			Case number (if kno	own)	
		ow. Do not list real estate leases. Unex nexpired personal property lease if the	•			ase period has not yet ended.
Des	scribe your unexp	ired personal property leases			Wil	I the lease be assumed?
Les	sor's name:	Marcia H. Pearson Trustee				No
					\boxtimes	Yes
	scription of leased perty:	Residential Lease Agreement				
Par	t 3: Sign Below					
		ury, I declare that I have indicated my ir ct to an unexpired lease.	ntention about an	/ property of my estate that	t secur	es a debt and any personal
X	/s/ Nicholas F	Marich	X /s/	Jeanne M. Marich		
	Nicholas F Ma		-	nne M. Marich		
	Signature of Debt	or 1	Sigi	nature of Debtor 2		
	Date Janu	ary 22, 2024	Date	January 22, 2024		

Fill in	this information to identify your case:			lirected in this form and	in Form
Debt	or 1 Nicholas F Marich		22A-1Supp:		
Debt	or 2 Jeanne M. Marich			umption of abuse	
(Spou	se, if filing)			to determine if a presur	
Unite	ed States Bankruptcy Court for the: Northern District o	f Ohio		nade under <i>Chapter 7 l</i> ïcial Form 122A-2).	Means Test
Case (if kno	e number wn)			t does not apply now be y service but it could ap	
			☐ Check if this is a	an amended filing	
	<u>icial Form 122A - 1</u>				
Ch	apter 7 Statement of Your Cur	rent Monthly Inc	come		12/19
a sepa numb	complete and accurate as possible. If two married people a arate sheet to this form. Include the line number to which the re (if known). If you believe that you are exempted from a pry service, complete and file Statement of Exemption from Form Including the Calculate Your Current Monthly Income	ne additional information applies resumption of abuse because yo	 On the top of any addition ou do not have primarily 	tional pages, write your i consumer debts or beca	name and case ause of qualifying
1.	What is your marital and filing status? Check one or	nly.			
	■ Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill ou		s 2-11.		
	☐ Married and your spouse is NOT filing with you.☐ Living in the same household and are not legal		olumns A and B. lines	2 11	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are le	out Column A, lines 2-11; do n	not fill out Column B. B	y checking this box, you	
	apart for reasons that do not include evading the				podde are nving
Fo ad	I in the average monthly income that you received from all so or example, if you are filing on September 15, the 6-month period of the income for all 6 months and divide the total by 6. Fill in the notal property, put the income from that property in one column of	d would be March 1 through August e result. Do not include any income	t 31. If the amount of your amount more than once.	monthly income varied du For example, if both spou	ring the 6 months,
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissions (before all	\$ 999.96	\$ 5,217.67	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a spouse if	\$	\$ 0.00	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular contributions d, your dependents, parents,	\$	\$0.00	
5.	Net income from operating a business, profession,				
		Debtor 1			
	Gross receipts (before all deductions)	\$ 0.00			
	Ordinary and necessary operating expenses	-\$ <u>0.00</u>			
	Net monthly income from a business, profession, or farm	m \$0.00 Copy here ->	\$0.00	\$	
6.	Net income from rental and other real property	Dalida a 4			
	Gross receipts (before all deductions)	Debtor 1 \$ 0.00			
	,	· · · · · · · · · · · · · · · · · · ·			
	Ordinary and necessary operating expenses Net monthly income from rental or other real property	-\$ <u>0.00</u> \$ 0.00 Copy here ->	\$ 0.00	\$ 0.00	
-		υ υ.υυ Copy here ->		Φ	
/.	Interest, dividends, and royalties		\$	\$0.00	

Debtor 1 Debtor 2

Nicholas F Marich Jeanne M. Marich

Case number (if known)

			Column A		Column B	
			Debtor 1		Debtor 2	or
8. Unemployment compensation			\$	0.00	non-filing	0.00
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benefit	under	*		Ψ	
For you\$	0.00	0_				
For your spouse\$		_				
9. Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as sinot include any compensation, pension, pay, annuity, or States Government in connection with a disability, combor death of a member of the uniformed services. If you under chapter 61 of title 10, then include that pay only texceed the amount of retired pay to which you would of under any provision of title 10 other than chapter 61 of the services.	tated in the next sentend r allowance paid by the l bat-related injury or disa received any retired pay to the extent that it does therwise be entitled if ref	ce, do United ability, paid not	\$	0.00	\$	0.00
10. Income from all other sources not listed above. Spend Do not include any benefits received under the Social Seas a victim of a war crime, a crime against humanity, or terrorism; or compensation pension, pay, annuity, or all States Government in connection with a disability, combor death of a member of the uniformed services. If necesseparate page and put the total below	ecurity Act; payments rec international or domest llowance paid by the Un bat-related injury or disa	ceived tic ited ability,				
·		_	\$	0.00	\$	0.00
			\$	0.00	\$	0.00
Total amounts from separate pages, if any.	-	+	\$	0.00	\$	0.00
 Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the tota	tal for Column B.	\$	999.96	 + _{\$}	5,217.67	= \$6,217.63 Total current monthly income
12. Calculate your current monthly income for the year	Follow these stens:					
12a. Copy your total current monthly income from line 1			Сору	line 11 l	nere=>	\$6,217.63_
Multiply by 12 (the number of months in a year)						x 12
12b. The result is your annual income for this part of the	e form				12	2b. \$ 74,611.50
13. Calculate the median family income that applies to	you. Follow these steps	s:				
Fill in the state in which you live.	ОН					
, in the second						
Fill in the number of people in your household.	6					
Fill in the median family income for your state and size To find a list of applicable median income amounts, go this form. This list may also be available at the bankrup	online using the link spe				13 tions for	\$ <u>128,750.00</u>
14. How do the lines compare?						
14a. \(\sime\) Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official				•	•	
14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2		The pre	Samption of			
14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2. Part 3: Sign Below		The pre	sampuon or			
Go to Part 3 and fill out Form 122A–2.	of page 1, check box 2, 7	·	·			true and correct.
Go to Part 3 and fill out Form 122A–2. Part 3: Sign Below	of page 1, check box 2, 7	this sta	·	in any atta		true and correct.

Debtor 1 Debtor 2	Nicholas F Marich Jeanne M. Marich		Case number (if known)	
Da	te January 22, 2024	Date	January 22, 2024	
	MM / DD / YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			

If you checked line 14b, fill out Form 122A-2 and file it with this form.

ebtor 2	Jeanne M. Marich	Case number (if known)	
ebtor 1	Nicholas F Marich		

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Manchester Tavern

Constant income of \$999.96 per month.*

ebtor 1	Nicholas F Marich		
ebtor 2	Jeanne M. Marich	Case number (if known)	

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 07/01/2023 to 12/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Manchester Animal Clinic

Constant income of \$549.79 per month.*

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employer: Summa Health** Constant income of **\$4,667.88** per month.*

*Paycheck Details:

Debtor 1 Debtor 2

Manchester Tavern

Date	Earnings	Overtime	Taxes	Other	Net Check
8/28/2023	458.50	0.00	48.62	0.00	409.88
9/11/2023	1,120.00	0.00	192.19	0.00	927.81
9/25/2023	1,120.00	0.00	192.19	0.00	927.81
10/9/2023	1,120.00	0.00	192.19	0.00	927.81
10/23/2023	1,120.00	0.00	192.19	0.00	927.81
11/6/2023	796.00	0.00	115.18	0.00	680.82
11/20/2023	265.25	0.00	27.29	0.00	237.96
1/15/2024	1,200.00	0.00	208.24	0.00	991.76
Totals:	7,199.75	0.00	1,168.09	0.00	6,031.66

Manchester Animal Clinic

Date	Earnings	Overtime	Taxes	Other	Net Check
7/14/2023	253. 75	0.00	30.00	7.61	216.14
7/28/2023	253.75	0.00	29.99	0.00	223.76
8/11/2023	253.75	0.00	29.99	0.00	223.76
8/25/2023	253.75	0.00	29.99	0.00	223.76
9/7/2023	253.75	0.00	30.00	0.00	223.75
9/22/2023	253.75	0.00	29.99	0.00	223.76
10/6/2023	253.75	0.00	29.99	0.00	223.76
10/19/2023	253.75	0.00	29.99	0.00	223.76
11/3/2023	253.75	0.00	30.00	0.00	223.75
11/17/2023	253.75	0.00	29.99	0.00	223.76
12/1/2023	253.75	0.00	29.99	0.00	223.76
12/15/2023	253.75	0.00	29.98	0.00	223.77
12/28/2023	253.75	0.00	30.00	0.00	223.75
1/12/2024	253.75	0.00	27.99	0.00	225.76
Totals:	10,752.25	0.00	1,585.98	7.61	9,158.66

Summa Health

Date	Earnings	Overtime	Taxes	Other	Net Check
7/6/2023	2,016.70	6.70	355.06	40.35	1,627.99
7/20/2023	1,360.10	0.00	196.81	26.00	1,137.29
8/3/2023	2,007.90	7.00	348.57	35.86	1,630.47
8/17/2023	2,421.90	8.10	459.11	0.00	1,970.89
8/31/2023	2,566.80	78.00	513.92	0.00	2,130.88
9/14/2023	2,104.50	12.70	377.84	0.00	1,739.36
9/28/2023	2,328.75	12.40	433.68	0.00	1,907.47
10/12/2023	2,308.05	0.00	426.04	0.00	1,882.01
10/26/2023	2,259.75	7.70	415.60	0.00	1,851.85
11/9/2023	2,221.80	7.90	399.64	0.00	1,830.06
11/22/2023	2,673.75	15.70	519.92	0.00	2,169.53
12/7/2023	2,004.45	16.10	349.77	0.00	1,670.78
12/21/2023	1,552.50	8.00	243.12	0.00	1,317.38
1/4/2024	2,176.95	15.90	383.82	0.00	1,809.03
Totals:	40,756.15	196.20	7,008.88	109.82	33,833.65

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	oter 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
+	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

+	\$200 \$78	filing fee administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

In re	Nicholas F Marich Jeanne M. Marich		Case No.	
mic	Coamic III. Marion	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	DNEV FOD DE	PRTOD(S)
				` /
p	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 paid to me within one year before the filing of the petition pehalf of the debtor(s) in contemplation of or in connection	on in bankruptcy, or agreed to	be paid to me, for serv	ed debtor(s) and that compensation ices rendered or to be rendered on
	For legal services, I have agreed to accept		\$	2,500.00
	Prior to the filing of this statement I have received.		\$	2,500.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	☐ Debtor ☐ Other (specify): Wanda	a Marich (Debtor's mothe	r)	
3. Т	The source of compensation to be paid to me is:			
	☐ Debtor ☐ Other (specify):			
l. [☑ I have not agreed to share the above-disclosed comp	ensation with any other perso	n unless they are memb	pers and associates of my law firm.
[I have agreed to share the above-disclosed compensa of the agreement, together with a list of the names of			
5. 1	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	cts of the bankruptcy c	ase, including:
b c	a. Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credited. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home.	ement of affairs and plan which ors and confirmation hearing, reduce to market value; ex ons as needed; preparation	ch may be required; and any adjourned hear xemption planning;	rings thereof;
б. Е	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any uptcy proceeding.	agreement or arrangement fo	or payment to me for rep	presentation of the debtor(s) in this
	anuary 22, 2024	/s/ Michael A St		
Da	ate	Michael A Steel Signature of Attori		
		Michael Steel		
			et Street Suite G	
		Fairlawn, OH 44 Fax:	1333	
		msteel@steelco	olaw.com	
		Name of law firm		

United States Bankruptcy Court Northern District of Ohio

In re	Jeanne M. Marich		Case No.	
		Debtor(s)	Chapter	7
	VERI	IFICATION OF CREDITOR M	MATRIX	
The abo	ove-named Debtors hereby verify tl	hat the attached list of creditors is true and con	rrect to the best	of their knowledge.
Date:	January 22, 2024	/s/ Nicholas F Marich		
		Nicholas F Marich		
		Signature of Debtor		
Date:	January 22, 2024	/s/ Jeanne M. Marich		
		Jeanne M. Marich		
		Signature of Debtor		

Nicholas F Marich

Affirm Inc. 650 California St. Fl. 12 San Francisco, CA 94108

Akron Children's Hospital One Perkins Square Akron, OH 44308

Ally Financial PO BOX 380901 Bloomington, MN 55438

Bank of America PO BOX 982238 El Paso, TX 79998

Barclays Bank Delaware PO BOX 8803 Wilmington, DE 19899

Canton School EMP CR UN 1380 MARKET AVE N. Canton, OH 44714

Canton School EMP CR UN 1380 Market Ave. N Canton, OH 44714

Capital One PO BOX 31293 Salt Lake City, UT 84131

Captial One PO BOX 31293 Salt Lake City, UT 84131

CBNA PO BOX 6497 Sioux Falls, SD 57117

Citi Bank - Best Buy Credit Services PO BOX 9001007 Louisville, KY 40290

Cleveland Clinic PO BOX 93766 Cleveland, OH 44101

Credit First NA/Firestone PO BOX 81083 Cleveland, OH 44181

Credit One Bank PO BOX 98875 Las Vegas, NV 89193 Dept. of Education/NELNET PO BOX 82561 Lincoln, NE 68501

Discover Bank PO BOX 30939 Salt Lake City, UT 84130

Discover Bank PO BOX 15316 Wilmington, DE 19850

Harley Davidson Credit PO BOX 21829 Carson City, NV 89721

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

JPMCB Card PO BOX 15369 Wilmington, DE 19850

Kohls/Capone PO BOX 3115 Milwaukee, WI 53201

Marcia H. Pearson 1572 McTweed Lane New Franklin, OH 44203

Marcia H. Pearson Trustee 1572 McTweed Lane New Franklin, OH 44203

Merrick Bank Corp. PO BOX 9201 Old Bethpage, NY 11804

National Credit Adjusters, L.L.C. 327 W. 4th. Ave. Hutchinson, KS 67501

NELNET/Education Financial PO BOX 82561 Lincoln, NE 68501

Opensky CBNK 101 Crossways Park Dr. W. Woodbury, NY 11797

Regional Income Tax Agency PO BOX 477900 Broadview Heights, OH 44147 Summit County CSEA 175 S. Main St., 5th Fl. Akron, OH 44308

SYNCB/AMER EAGLE DC PO BOX 965005 Orlando, FL 32896

SYNCB/Car Care SYN Car C PO BOX 965036 Orlando, FL 32896

SYNCB/Lowes PO BOX 965005 Orlando, FL 32896

SYNCB/MC PO BOX 965005 Orlando, FL 32896

SYNCB/PPC PO BOX 530975 Orlando, FL 32896

SYNCB/PPMC PO BOX 965005 Orlando, FL 32896

SYNCB/SYNC Bank Sport C/O PO BOX 965036 Orlando, FL 32896

TD Bank USA/TargetCredit PO BOX 673 Minneapolis, MN 55440

The Huntington Natl Bank PO BOX 1558 Columbus, OH 43216

Upgrade Inc. 2 N. Central Ave. Fl. 10 Phoenix, AZ 85004